

Remember: You can live well with osteoporosis!

Osteoporosis in the Workplace

In this issue

- Osteoporosis in the Workplace
- Fracture Fact
- A Recipe from Our Sponsor
- Funny Bone
- Virtual Education Forum

COPING Archives

[Click here to view the COPING archives](#)

Event calendar

Public
Lecture: "POTENTIAL
FRACTURE PREVENTION
by CO-THERAPY of
PROGESTERONE and an
ANTIRESORPTIVE"

Vancouver, BC
12-Sep-2012

Lunch and Learn
Flesherton, Ontario
01-Oct-2012

Bones n Beer
Richmond, BC
14-Nov-2012

[View Calendar](#)

Each year on Labour Day, Canada celebrates the achievements of workers from coast to coast of this great country of ours. However, for thousands of working Canadians who have recently been diagnosed with osteoporosis, a celebration may not be in the cards. For them, their jobs and their careers may have been forever changed when their doctor announced, "You have osteoporosis."

What comes to mind when you hear the word "osteoporosis"? Is it an image of a frail, elderly woman? If so, then why publish an article on osteoporosis in the workplace? Because osteoporosis does not only affect elderly women. It affects men and women at all stages of life, including millions of people worldwide who are working.

Early on in the operation of Osteoporosis Canada's 1-800 Bone Health line, a call came from a man who made his living as a firefighter. He had suffered a back injury and, in the course of dealing with it, discovered he had osteoporosis and a broken bone in his spine. He thought osteoporosis was "a little old ladies' disease." He had no idea men could suffer from osteoporosis, even men like him, who had always led an active and healthy life with no known family history of osteoporosis. Appalled and confused, he was concerned about his future because he had a family to support but clearly could not continue as a firefighter. What was he to do?

Women and men are living longer and working longer. It is estimated that by the year 2041, 25% of the Canadian population will be over 65 (about double what it is now), and the incidence of osteoporosis and osteoporotic fractures in the workplace is likely to increase proportionally. Here are a few relevant Canadian statistics:

- At least one in three women and one in five men will suffer from an osteoporotic fracture during their lifetime.
- Osteoporotic fractures are more common than heart attack, stroke and breast cancer combined.
- Over 80% of all fractures after age 50 are caused by osteoporosis.
- The risk of a major osteoporotic fracture in Canada is among the highest in the world. Each year 30,000 Canadians break their hip and many more suffer osteoporotic fractures of the spine, wrist, shoulder and pelvis.

In 2002, the International Osteoporosis Foundation published a report titled *Osteoporosis in the Workplace*, looking in particular at the European Union, the United States and Canada. The report estimated that at that time the annual direct cost of treating osteoporotic

fractures of people in the workplace in the USA, Canada and the European Union was approximately \$48 billion. In Canada alone, the estimated cost was about \$1.9 billion. This cost does not include the indirect economic costs and huge emotional price that has to be paid by someone who has suffered a hip fracture or a broken bone in their spine. Osteoporotic fractures in patients younger than 60 lead to higher relative indirect costs than in older individuals: these costs include sick leave, loss of job days and related income, unemployment and disability payments and loss of productivity to the employer, as well as emotional distress for the both the patient and the family who become care givers.

A recently published report states, "The number of days missed from work (in Canada) due to osteoporosis-related fractures is estimated at 3,123,298 days (12,013 full-time employment years) for individuals aged 50 to 69 years." ¹ More often than not, osteoporosis is not recognized in the workplace as a chronic condition that needs to be accommodated.

What can you do to minimize your risk of breaking a bone at work?

Know your limitations. Learn all you can about maximizing your bone health through a balanced calcium and protein rich diet, vitamin D supplementation and regular exercise. Work with your healthcare professionals so you understand what types of activities (at home and at work) you should not do and which you can do. Recognize that there are some jobs that you should not attempt because they carry too high a risk for fracture. All provinces and the federal government have programs to help individuals find modified work that suits their abilities and physical limitations.

Be aware of your work environment. Be alert to any unsafe conditions and report them immediately to your supervisor or your health and safety committee. You have the right to refuse any tasks that are unsafe.

Help educate your supervisors, your co-workers and your health and safety committee on the importance of bone health and a fracture-free workplace. Take copies of Osteoporosis Canada's fact sheets - *Diagnosis, Drug Treatments,*

Nutrition and Exercise for Healthy Bones - to work and share them with others there. These are available by calling 1-800-463-6842 or at www.osteoporosis.ca under the Programs and Resources tab.

Are you an employer?

You already know how work related injuries affect your bottom line but chances are that you've never given much thought to the impact osteoporosis could have on your workplace, or to the fact that one in three women and one in five men will suffer an osteoporotic fracture. You say you do not have a high-risk work environment like the firefighter? Even a simple trip over a carelessly placed extension cord can result in a fractured wrist, a week or more off work, and months of rehabilitation.

Are you a researcher?

Why not do a study on osteoporosis and the workplace? Our own research for this article tells us that much more information is needed.

Gail Lemieux's personal story will resonate with anyone whose working life was ended prematurely by osteoporosis. A home care coordinator for a medical laboratory in Barrie, Ontario, Gail enjoyed her job working with people who could not come to the lab for medical testing. In March 1980, at the age of 40, she slipped on a patch of ice in front of her home and fractured two vertebrae. She was hospitalized for two weeks and spent about six months recuperating. Gail eventually recovered, but she was not investigated or treated for osteoporosis, even though her mother had the disease and was confined to a wheelchair. In 1990 Gail slipped on the stairs at home and fractured another vertebra. Within a year she broke yet another vertebra, a common "cascade" effect among people with osteoporosis.

In almost constant pain, Gail would have to leave work early and lie flat on her back at home until heading off to work again the next morning. "I didn't really have a life at that time, certainly not of any quality," remembers Gail. She was put on long term disability because of her constant pain, inability to do her job, and the likelihood that some of her fractures may have happened at work. "It is difficult to pinpoint when and where the later fractures had occurred," says Gail. "And employers need to be concerned about possible liability issues for on-the-job injuries."

Eleven years after her first fracture, Gail was finally diagnosed with osteoporosis. "I had a dual reaction when I was diagnosed," Gail says. "One reaction was thank goodness I have a diagnosis. My other reaction was what do I do now? You know, I really didn't know anything about osteoporosis. I thought because my mother had it, that was just something that happened to her and it never crossed my mind it could happen to me. I still get a lot of pain if I do things I shouldn't do." She cannot vacuum or dust. Well, who likes housework anyway, you might say. But it makes for a restricted life. Equally frustrating is the fact that her physical limitations can mean depending on others for help with activities she used to do herself. "Your independence can certainly be jeopardized," says Gail.

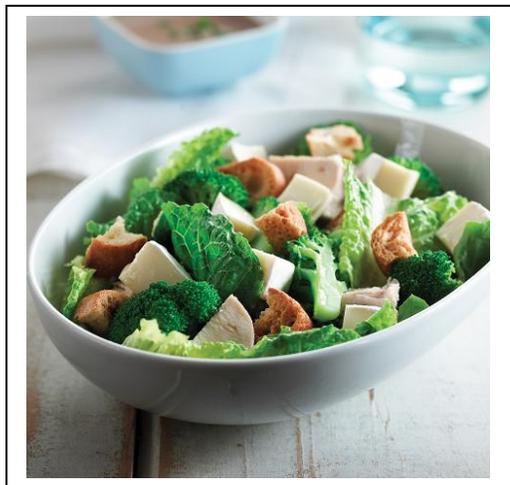
Gail has not returned to work since 1991. Battling additional health concerns today, Gail does her best to stay busy, active and positive. "I'm not about to give up now," she says. Gail Lemieux went on to become a member of the Board of Directors of Osteoporosis Canada and a founding member of the Canadian Osteoporosis Patient Network.

We all recognize that as we age there are some things we can no longer do quite the same as when we were 20 years old. This realization is even more profound for those of us with osteoporosis. At work or play, osteoporotic bones cannot tolerate the same levels of stress or strain as healthy bones. Nevertheless, by acknowledging our own limitations and taking steps to maximize our bone health and minimize our fracture risk, we can still live well – and yes we can even work well – with osteoporosis.

1. *The burden of illness of osteoporosis in Canada*, Tarride et al, Osteoporosis International, March 2012

FRACTURE FACT: Peak bone mass is achieved at an early age, age 16-20 in girls and age 20-25 in young men.

A Recipe from Our Sponsor – Chicken Salad with Brie



Course: Salads

Prep. Time: 15 mins

Yields: 4 to 6 servings

2/3 milk product serving(s) per person

Ingredients:

8 cups (2 l) romaine lettuce, washed and shredded

3 cups (750 ml) broccoli salad mix or coleslaw

2 1/2 cups (625 ml) cooked chicken, diced

1/2 cup (125 ml) store-bought balsamic dressing

1 1/2 cups (375 ml) store-bought croutons

4 oz (125 g) **Canadian brie**, diced

Directions: In a large bowl, coat the lettuce, broccoli salad mix and chicken with the dressing. Divide into servings, garnish with croutons and Brie, and savour. For more information about this recipe:

<http://www.dairygoodness.ca/getenough/recipes/chicken-salad-with-brie>

FUNNY BONE:

Laughing is good exercise. It's like jogging on the inside.

VIRTUAL EDUCATION FORUM:

What you need to know about osteoporosis medications and treatment

On **Wednesday, September 26, 2012**, Dr. Colleen Metge from the University of Manitoba will be taking us through the variety of medications and treatment available for individuals with osteoporosis. Join us and participate in this presentation and learn how you can reduce your risk of having a broken bone from osteoporosis!

How to participate on the day of the event?

Go to: <http://webcast.otn.ca/>, Click "Live Events", then click "Private Event" on the left side of the screen.

If you receive an error message: "Content was blocked because it was not signed by a valid security certificate." go to the popup menu that appears at the top of the screen, click and choose "display content."

Enter the following:

Username: osteo

Password: forum09

Click on TSM#: 19959940

For more information please contact:

ccruz@osteoporosis.ca or 1-800-463-6842 ext. 224

Do you have the system requirements? Test your system by clicking on: <http://webcast.otn.ca/support.html>



Presentation Times by Time Zones

PT: 10:30 a.m. to 12:00 p.m.

MT: 11:30 a.m. to 1:00 p.m.

CT: 12:30 p.m. to 2:00 p.m.

ET: 1:30 p.m. to 3:00 p.m.

AT: 2:30 p.m. to 4:00 p.m.

*Most of Saskatchewan CST: 11:30 a.m. to 1:00 p.m.

This issue of COPING is sponsored by Dairy Farmers of Canada



NUTRITION
DAIRY FARMERS OF CANADA



getenough.ca